

NORTHROP GRUMMAN

Northrop Grumman Corporation
Mail Stop 1401
P.O. Box 1693
Baltimore, Maryland 21203

January 31, 2008

Missouri Department of Natural Resources
Hazardous Waste Program, Biennial Report
P.O. Box 176
Jefferson City, MO 65102-0176

RE: 2007 Biennial Hazardous Waste Report
Northrop Grumman Guidance and Electronics Company, Inc.
EPA ID# MOD007152903
Missouri ID# 001317

Dear Sir or Madam:

Please find enclosed a RCRA Subtitle C Site Identification Form for the Northrop Grumman Guidance and Electronics Company, Inc. facility at 4811 West Kearney in Springfield, Missouri. This form is being submitted as part of the 2007 Biennial Hazardous Waste Report for the facility. An electronic copy of the report has already been submitted electronically to the following email address:
hazwastereport@dnr.mo.gov.

Please note that the facility ceased manufacturing operations in August 2007, so the majority of the wastes generated in 2007 were the result of this shutdown. In addition, all future correspondence to this facility should be addressed to my attention at the above address.

If you should have any questions or require additional information please feel free to call me on (410) 765-7610. Thank you very much for your attention to this matter.

Sincerely,



Donna Kreis
Principal Environmental Engineer

Enclosure
CERT/RR # 7006 3450 0000 1596 5894



RECEIVED

FEB 08 2008

Hazardous Waste Program
MO Dept. of Natural Resources

SEND COMPLETED FORM TO: The Appropriate State or EPA Regional Office.	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM		
1. Reason for Submittal (See instructions on page 9) MARK ALL BOX(ES) THAT APPLY	Reason for Submittal: <input type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) <input checked="" type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #____) <input checked="" type="checkbox"/> As a component of the Hazardous Waste Report		
2. Site EPA ID Number (page 10)	EPA ID Number <div style="border: 1px solid black; padding: 2px; text-align: center;"> M O D 0 0 7 1 5 2 9 0 3 </div>		
3. Site Name (page 10)	Name: Northrop Grumman Guidance and Electronics Company, Inc.		
4. Site Location Information (page 10)	Street Address: 4811 WEST KEARNEY STREET		
	City, Town, or Village: Springfield	State: MO	
	County Name: Greene	Zip Code: 65803	
5. Site Land Type (page 10)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 10)	A. 334412		B.
	C.		D.
7. Site Mailing Address (page 11)	Street or P. O. Box: PO Box 1693 Mail Stop 1401		
	City, Town, or Village: Baltimore		
	State: MD		
	Country: United States	Zip Code: 21203	
8. Site Contact Person (page 11)	First Name: Donna	MI: L.	Last Name: Kreis
	Phone Number: 4107657610 Extension:		E-mail address: donna.kreis@ngc.com
9. Operator and Legal Owner of the Site (pages 11 and 12)	A. Name of Site's Operator: Northrop Grumman Guidance and Electronics Company, Inc.		Date Became Operator (mm/dd/yyyy): 04/02/2001
	Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
	B. Name of Site's Legal Owner: Northrop Grumman Guidance and Electronics Company, Inc.		Date Became Owner (mm/dd/yyyy): 04/02/2001
	Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		

9. Legal Owner (Continued) Address	Street or P.O. Box: 1840 Century Park East City, Town or Village: Los Angeles State: CA Country: UNITED STATES		Zip Code: 90067
10. Type of Regulated Waste Activity Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 13 to 16)			
A. Hazardous Waste Activities Complete all parts for 1 through 6.			
Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/> 1. Generator of Hazardous Waste If "Yes", choose only one of the following - a, b or c.		Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 2. Transporter of Hazardous Waste	
<input checked="" type="checkbox"/> a. LQG: Greater than 1000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or		Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 3. Treater, Storer or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.	
<input type="checkbox"/> b. SQG: 100 to 1000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or		Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 4. Recycler of Hazardous Waste (at your site)	
<input type="checkbox"/> c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste		Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 5. Exempt Boiler and/or Industrial Furnace	
In addition, indicate other generator activities.		<input type="checkbox"/> a. Small Quantity On-Site Burner Exemption	
Y <input type="checkbox"/> N <input checked="" type="checkbox"/> d. United States Importer of Hazardous Waste		<input type="checkbox"/> b. Smelting, Melting, and Refining	
Y <input type="checkbox"/> N <input checked="" type="checkbox"/> e. Mixed Waste (hazardous and radioactive) Generator		Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 6. Underground Injection Control	
B. Universal Waste Activities		C. Used Oil Activities Mark all boxes that apply.	
Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. Mark all boxes that apply:		Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 1. Used Oil Transporter If "Yes", mark each that applies.	
<div style="display: flex; justify-content: space-between;"> <div> a. Batteries b. Pesticides c. Thermostats d. Lamps e. Other (specify) f. Other (specify) g. Other (specify) </div> <div style="text-align: center;"> <u>Managed</u> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> </div>		<input type="checkbox"/> a. Transporter <input type="checkbox"/> b. Transfer Facility	
Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 2. Destination Facility for Universal Waste Note: A hazardous waste permit may be required for this activity.		Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 2. Used Oil Processor and/or Re-refiner If "Yes", mark each that applies.	
		<input type="checkbox"/> a. Processor <input type="checkbox"/> b. Re-refiner	
		Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 3. Off-Specification Used Oil Burner	
		Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 4. Used Oil Fuel Marketer If "Yes", mark each that applies.	
		<input type="checkbox"/> a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner	
		<input type="checkbox"/> b. Marketer Who First Claims the Used Oil Meets the Specifications	

11. Description of Hazardous Wastes (see instructions on page 17)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	D002	D003	D004	D007	D008	D009
D010	D011	D035	F002	F003	F005	F006
F007	F009	LABP	P063	P098	P106	U135

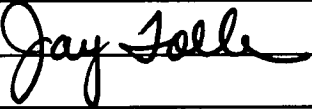
B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if needed for more waste codes.

12. Comments (see instructions on page 17)

Section 11, Box A, U151.

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

(See instructions on page 17)

Signature of owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	Jay Tolle, Mgr, Env Prgrms	02/01/2008